

WAIVER OF QUALIFICATION

TO THE CLERK:

_____, Virginia, Circuit Court

NAME OF DECEDENT

DATE OF DEATH

1. I/We, the executor(s) appointed by the decedent's will,
I refuse the executorship
I refuse the executorship in favor of the co-executor(s)

SIGNATURE OF EXECUTOR(S)

2. I/We, residual or substantial legatee(s) (persons to whom decedent willed personal property), or
I/We, distributees of the intestate decedent's estate (relatives under Va. Code § 64.1-11; see also § 64.1-1),
decline to qualify on the estate and request appointment of

NAME AND ADDRESS OF PERSON NOMINATED FOR APPOINTMENT

as administrator, c.t.a. (if decedent left a will) or
as administrator (if decedent did not leave a will)

SIGNATURE(S), LEGATEE(S)/DISTRIBUTE(S)

RELATIONSHIP TO DECEDENT

_____, Virginia:

CITY/COUNTY

Acknowledged, subscribed and sworn to before me on _____

DATE

by _____

NAME, TITLE, ETC.

MY COMMISSION EXPIRES _____ Notary Public

_____, Clerk, by _____ Deputy Clerk